Lummi Indian Business Council 2022 Professional Services Contract

DEPARTMENT:		PROGRAM:	PROGRAM:	
CONTRACTOR: Please include official	I name of your busine	PROGRAM MANAGER:		
ADDRESS:		FUND#:		
		TYPE OF SERVICES:		
TELEPHONE#:		CONTRACT#:		
S.S.N. or EIN#:		BEGINNING DATE: E	ENDING DATE:	
SCOPE OF WORK:	mian Faaikilitu C	tudu (Dusiness Dlan for the I		
Conduct a Cultural Heritage Tou	vrism Feasibility Si	tuay & Business Plan for the Li	ummi Nation.	
LOCATION:		CONTRACT AMOUNT: \$	75,000	
above Scope of Work. The Contract obtaining prior written approval of L compensation or to the time require incorporated in a written approved independent contractor and not an The Contractor shall be responsible payments both for Contractor and CIRS at the end of the fiscal year uncagents and employees, harmless fraccount of injuries or damages sust Contractor, its agents or employees remuneration for services. The Contummi Indian Business Council as a prior debt to LIBC or LNSO the delpayback agreement made with LIBC ACCEPTANCE OF AGRE Work or Services for this agree from the LIBC Contracts Office	LIBC. Any modificated for the contract's format amendment employee. No insues for all taxes, social Contractor's employeder the official name om all suits, claims tained by any persons pursuant to this contractor must provid an additional insure bt will automatically C Accounting Department shall not b	tions to this contract including any is performance or any changes in it or change order to this contract. It or change order to this contract. It is security payment, state disability rees. The Lummi Indian Business of your business. The Contract or liabilities of any nature, including or property resulting in whole contract, or on account of any unpaile proof of general liability or profed in the amount specified in The y be deducted from any payment rement.	y increase in the amount of the description of work must be The Contractor shall be an s will be provided to the contractor. y insurance and other similar Council will be filing a 1099 with the or shall hold LIBC and its officers, ling costs and expenses, for or on or in part from activities of the nid wages, materials or other essional liability insurance naming Scope of Work. If the Contractor ow owing to Contractor, unless there is	
Department Director	// Date	Contractor	//	
	, ,			
General Manager or Council	//////	_ rev	revised form 12/29/11	

Depending which oversees your department..